PTO/SB/17 (10-07) Approved for use through 06/30/2010. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMER Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.							
Effective on 12/08/2004. Fees pursuent to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Complete if Known				
			Application Number		10/535,683-Conf. #9731		
FEE TRANSMITTAL		Γ	Filing Date	1	May 19, 2005		
			First Named Inv	entor	Jon VALGEIRSSON		
For FY 2008			Examiner Name		S. L. Chung		
Applicant claims small entity status. See 37 CFR 1,27			Art Unit	1	1626		
TOTAL AMOUNT OF PAYMENT (\$) 180.00			Attorney Docket No.		2815-0308PUS1		
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
x Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee							
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
FILING FEES SEARCH FEES EXAMINATION FEES							
Application Type Fe	Small Entity e (\$) Fec (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees P	aid (\$)
	10 155	510	255	210	105		
	10 105	100	50	130	65		
	10 105	310	155	160	80		
	10 155	510	255	620	310		
	10 105	0	0	0	0		
2. EXCESS CLAIM FEES Small Entity							
							Fee (S)
Each claim over 20 (including Reissues)						50	25
Each independent claim over 3 (including Reissues)						210	105
Multiple dependent claims 370 185							185
Total Claims Extra Claims Fee (\$) Fee I			ald (\$)	(\$) Multiple Dependent Claims			
8 -32= x =			Fee (\$) Fee Paid (\$)				1
HP = highest number of total claims pai	d for, if greater than 20.						
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)							
HP = highest number of independent claims paid for, if greater than 3.							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer iistings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See \$3 U.S.C. 41(a)(1)(0) and 37 CFR 1.16(s).							
sneets of fraction thereof. See 35 U.S.C. 41(a)(1)(b) and 37 CFR 1.10(s).  Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)							
- 100 = /50 = (round up to a whole number) x =							
4. OTHER FEE(S) Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)							
Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00							
SUBMITTED BY  STATE OF THE STAT							
(705) 205-6000 (Attorney/Agent) 40,009 (Respiration (705) 205-6000							
Name (Print/Type) MaryAnne Arn	nstrona				Date APR	2 0 20	ine